

# **RETAIL LIQUOR BY THE DRINK (PICNIC) 7 DAYS**

## **\$25.00**

1. Completed picnic application form filled out in **BLACK INK or TYPED, SIGNED** by Managing Officer.
2. **Bank Draft, Money Order, Certified Check or Cashier's Check**, payable to the Director of Revenue, State of Missouri, in the amount of **\$25.00**.
3. **Copy of Missouri Retail Sales Tax License or Exemption Letter/Certificate** in the correct name of the organization and address where event will be held.
4. **Statement of No Sales/Use Tax Due**.
5. Copy of Managing Officer's **PAID PERSONAL PROPERTY or REAL ESTATE TAX RECEIPT** for the year immediately preceding the date of the application.
6. Copy of Managing Officer's **VOTERS REGISTRATION CARD, LETTER OR CERTIFICATE**.
7. Letter from the **PROPERTY OWNER** giving permission for the organization to sell Retail Liquor By the Drink at said location during the day or days named therein.
8. **Filled out Managing Officer Appointment Form (attached)** giving the managing officer permission to obtain a picnic license in the organization's name for the day or days the event will be held.
9. Copy of **CITY** license or letter of approval, if located in an incorporated area.

**The hours of sale for this type of license will be: LIQUOR, BEER AND WINE may be sold between the hours of 6:00 a.m. and 1:30 a.m. on Weekdays and on Sunday beginning at 11:00 a.m. until 12 MIDNIGHT.**

*Mail back to the local agent for approval and processing.*

*For further information or if you have additional questions, contact your district office:  
Kansas City (816-889-2574)  
Jefferson City (573-751-2964)  
St. Louis (314-340-6835)*

**SUBMIT EARLY AND ALLOW A WEEK TO TEN DAYS FOR PROCESSING!**

**Provide a mailing address to return license.**

# MANAGING OFFICER APPOINTMENT FORM

DATE: \_\_\_\_\_

(Name of Corporation/or Organization) \_\_\_\_\_

has appointed (Name of Managing Officer) \_\_\_\_\_

as Managing Officer for the **(corporation/or organization)** who is either an officer or an employee  
invested with the general control and superintendents of a whole, or a particular part of, the  
**(corporations/or organizations)** business for the purpose of obtaining a state liquor license in the  
name of the **(corporation/or organization)**.

\_\_\_\_\_  
Officer of the Corporation



STAMP LICENSE TYPE HERE	DATE ISSUED	DATES EFFECTIVE	EXISTING LICENSE NUMBER	LICENSE NUMBER
	LICENSEE'S NAME			FEE ENCLOSED
	DOING BUSINESS AS			TELEPHONE NUMBER
	ADDRESS			COUNTY
	CITY			ADMINISTRATIVE CODES
	LEGAL DESCRIPTION			
MAILING ADDRESS				
ZIP CODE	SUPERVISOR OF ALCOHOL AND TOBACCO CONTROL			

The undersigned organization hereby applies to the Supervisor of Alcohol and Tobacco Control of Missouri for a license for the premises described herein, and for the purpose of inducing the Supervisor to issue it said license, makes the statements and answers hereinafter set out.

1. Legal name of church, school, civic, service, fraternal, veteran, political, or charitable club or organization. \_\_\_\_\_  
\_\_\_\_\_
2. Location of principal office. \_\_\_\_\_
3. Missouri Retail Sales Tax License No. \_\_\_\_\_ or effective date(s) of Missouri Retail Sales Tax Exemption letter: \_\_\_\_\_
4. Please give the following information for the managing officer of the organization for which this license is sought:  
NAME \_\_\_\_\_ SSN \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
ADDRESS \_\_\_\_\_ TELEPHONE ( ) ( )  
(HOME) (WORK)
5. If managing officer is a naturalized citizen, give the date and court in which managing officer was admitted to citizenship:  
DATE: \_\_\_\_\_ COURT: \_\_\_\_\_
6. In what city, town, or village does managing officer pay taxes? \_\_\_\_\_
7. Where is managing officer registered to vote?  
Precinct \_\_\_\_\_ City \_\_\_\_\_ Ward \_\_\_\_\_ County \_\_\_\_\_

8a. Has the organization, the managing officer, any officer or director, or any person with a direct or indirect financial interest in the organization ever been charged with or indicted for, received a suspended imposition of sentence for, or been convicted of a violation of any federal law, law of the State of Missouri, or law of any other state or country, or entered and/or been present in the United States in violation of federal immigration laws? ☐ Yes ☐ No

8b. Has the organization, the managing officer, any officer or director, or any person with a direct or indirect financial interest in the organization ever had a license revoked or suspended by the Supervisor of Alcohol and Tobacco Control or by the licensing authority of any other state, county, or city? ☐ Yes ☐ No

If you answered yes to any of 8a or 8b please list the details: \_\_\_\_\_

9. Specify the basis of the organization's right to occupy premises for which it seeks a picnic license? (Own, lease, rental agreement - state terms of the agreement)

10. Does the organization, any officer or director, or the managing officer above named have any direct or indirect financial interest in any brewery, winery, distillery, rectifying or blending plant, or gasohol facility, or wholesale liquor or beer concern, either as part owner, shareholder, agent, employee or otherwise? ☐ Yes ☐ No

If so, give details: \_\_\_\_\_

11. State the name and address of any distiller, wholesaler, winemaker or brewer, or any employee, officer, or agent thereof, who will directly or indirectly, loan, give away, or furnish equipment, money, credit, or property of any kind to the organization, except ordinary commercial credit for liquor and/or non-intoxicating beer sold to the organization and except such articles and services, if any, as are permitted by RSMo 311.070 or the Regulations of the Supervisor of Alcohol and Tobacco Control, or any who has done so. (If none, so state)

12. Is this application made by the organization as a subterfuge to permit any person or entity other than the organization to secure a license from the Supervisor of Alcohol and Tobacco Control, in the organization's name, for his/its benefit? ☐ Yes ☐ No

#### IMPORTANT

*You are required to report any change of fact contained herein within (10) days!*

The organization understands that false answers are grounds for denial of a license. The organization understands that if any statements or answers made herein are untrue and the license herein applied for is granted, such license may be revoked, suspended, fined, placed on probation or otherwise disciplined by the Supervisor.

The organization acknowledges that any license granted by the Supervisor will be subject to the provisions of Chapters 311 and 312, RSMo, and the Rules and Regulations of the Supervisor of Alcohol and Tobacco Control, and that failure to conform thereto will subject its license to suspension, revocation, fine, probation or other discipline by the Supervisor. Further, the organization agrees to allow inspections made in accordance with the Rules and Regulations of the Supervisor of Alcohol and Tobacco Control, and authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed agents to examine and secure copies of any and all business records or documents related in any way to this business, including, but not limited to, those on file with any bookkeeper.

The organization authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed agents to examine and secure copies of any and all financial records, including, without limitation, signature cards, checking and savings account statements, notes and loan documents, deposit and withdrawal records, and escrow documents of its financial institution(s), and any financial documents related to the business.

The organization authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed agents to conduct a criminal record check of the managing officer and of all the organization's officers and directors.

(TYPE OR PRINT NAME)

I, \_\_\_\_\_, of lawful age, being first duly sworn upon my oath, depose and say that I have read this application and fully understand same and that I know the contents thereof and the answers and statements contained therein and that the same are true.

DATE

MANAGING OFFICER

#### FOR OFFICE USE ONLY

Based on the information contained herein, the undersigned forward this application for consideration by the Supervisor of Alcohol and Tobacco Control and hereby recommend that this application be approved and the license issued.

AGENT

DISTRICT SUPERVISOR